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SERIAL NUMBER 10/783,259	FILING OR 371(c) DATE 02/20/2004 RULE	CLASS 435	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. 358690-00005-1
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/449,528 02/21/2003

** FOREIGN APPLICATIONS *****

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

27805

TITLE

HUMAN LYMPHOCYTE MEDIUM ADJUVANT

FILING FEE RECEIVED 1120	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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